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2622
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TRANSMITTAL FORM

(To be used for all correspondence after initial filing)

Application Number	09/087,671
Filing Date	May 29, 1998
First Named Inventor	Massimo Mancuso
Group Art Unit	2622
Examiner Name	Cheukfan Lee
Attorney Docket No.	853063.450

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OCT 24 2001

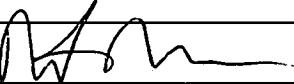
Technology Center 2600

ENCLOSURES (check all that apply)

- | | | |
|---|---|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form
<input checked="" type="checkbox"/> Fee Attached
<input checked="" type="checkbox"/> Amendment/Response
<input type="checkbox"/> After Final
<input type="checkbox"/> Affidavits/declaration(s)
<input checked="" type="checkbox"/> Extension of Time Request
<input type="checkbox"/> Express Abandonment Request
<input type="checkbox"/> Information Disclosure Statement; Form PTO-1449
<input type="checkbox"/> Cited References
<input type="checkbox"/> Certified Copy of Priority Document(s)
<input type="checkbox"/> Response to Missing Parts under 37 C.F.R. 1.52 or 1.53
<input type="checkbox"/> Response to Missing Parts/Incomplete Application | <input type="checkbox"/> Assignment Papers (for an Application)
<input type="checkbox"/> Drawing(s)
<input type="checkbox"/> Request for Corrected Filing Receipt
<input type="checkbox"/> Licensing-related Papers
<input type="checkbox"/> Petition
<input type="checkbox"/> Petition to Convert to a Provisional Application
<input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address
<input type="checkbox"/> Declaration
<input type="checkbox"/> Statement under 37 CFR 3.73(b)
<input type="checkbox"/> Terminal Disclaimer
<input type="checkbox"/> Small Entity Statement
<input type="checkbox"/> Request for Refund | <input type="checkbox"/> CD(s), Number of CD(s) _____
<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Return Receipt Postcard
<input type="checkbox"/> Additional Enclosure(s) (please identify below):
<hr/> <hr/> <hr/> <hr/> <hr/> |
|---|---|--|

Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Individual Name	Robert Iannucci	 00500 <small>PATENT TRADEMARK OFFICE</small>
Signature		
Date	October 16, 2001	

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, D.C. 20231 on the date specified below.

Typed or printed name	Kristine Houston	
Signature		Date: October 16, 2001



FEET TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$)

400

Complete If Known

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METHOD OF PAYMENT				FEE CALCULATION (continued)																																											
<p>1. <input type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:</p> <table border="1"> <tr> <td>Deposit Account Number</td> <td>19-1090</td> </tr> <tr> <td>Deposit Account Name</td> <td>Seed Intellectual Property Law Group PLLC</td> </tr> </table> <p><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 and credit any overpayment to Deposit Account Number above.</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p>								Deposit Account Number	19-1090	Deposit Account Name	Seed Intellectual Property Law Group PLLC																																				
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<p>2. <input checked="" type="checkbox"/> Payment Enclosed:</p> <table border="1"> <tr> <td><input checked="" type="checkbox"/> Check</td> <td><input type="checkbox"/> Credit card</td> <td><input type="checkbox"/> Money Order</td> <td><input type="checkbox"/> Other</td> </tr> </table>								<input checked="" type="checkbox"/> Check	<input type="checkbox"/> Credit card	<input type="checkbox"/> Money Order	<input type="checkbox"/> Other																																				
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<p>1. BASIC FILING FEE</p> <table border="1"> <thead> <tr> <th>Large Entity</th> <th>Small Entity</th> <th colspan="2">Fee Description</th> <th>Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> <th></th> </tr> </thead> <tbody> <tr> <td>101</td> <td>740</td> <td>201</td> <td>370</td> <td>Utility filing fee</td> </tr> <tr> <td>106</td> <td>330</td> <td>206</td> <td>165</td> <td>Design filing fee</td> </tr> <tr> <td>107</td> <td>510</td> <td>207</td> <td>255</td> <td>Plant filing fee</td> </tr> <tr> <td>108</td> <td>740</td> <td>208</td> <td>370</td> <td>Reissue filing fee</td> </tr> <tr> <td>114</td> <td>160</td> <td>214</td> <td>80</td> <td>Provisional filing fee</td> </tr> <tr> <td colspan="4">SUBTOTAL (1)</td> <td>(\$0)</td> </tr> </tbody> </table>								Large Entity	Small Entity	Fee Description		Fee Paid	Fee Code	Fee (\$)	Fee Code	Fee (\$)		101	740	201	370	Utility filing fee	106	330	206	165	Design filing fee	107	510	207	255	Plant filing fee	108	740	208	370	Reissue filing fee	114	160	214	80	Provisional filing fee	SUBTOTAL (1)				(\$0)
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<p>**or number previously paid, if greater; For Reissues, see above</p>																																															
<p>SUBMITTED BY</p> <table border="1"> <tr> <td>Name (Print/Type)</td> <td>Robert Iannucci</td> <td>Registration No. Attorney/Agent)</td> <td>33,514</td> </tr> <tr> <td>Firm Name/Address</td> <td colspan="3"></td> </tr> <tr> <td>Signature</td> <td></td> <td>Date</td> <td>October 16, 2001</td> </tr> </table>								Name (Print/Type)	Robert Iannucci	Registration No. Attorney/Agent)	33,514	Firm Name/Address				Signature		Date	October 16, 2001																												
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